

\* 20

REPORTS INVENTORY						CONTROL NO.	
PREPARE IN DUPLICATE							
1. TITLE OF REPORT (if a fill-in report include Form No.) Nonappropriated Unit Fund Statement of Operations and net worth						2. TYPE OF REPORT	
						<input checked="" type="checkbox"/> STATISTICAL <input type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING	
						3. FUNCTIONAL AREA	
						<input checked="" type="checkbox"/> PERSONNEL <input type="checkbox"/> LOGISTICS <input type="checkbox"/> MEDICAL <input checked="" type="checkbox"/> TRAINING <input type="checkbox"/> SECURITY <input checked="" type="checkbox"/> FINANCE	
4. NO. OF COPIES PREPARED Two (2)		5. FREQUENCY (weekly, monthly, quarterly, etc.) Monthly				6. DISTRIBUTION (No. of components not number of copies) One (1)	
7. FORMAT (memorandum, form computer print-out, etc) DA Form 1758		8. ADP PROCESSING				9. DIRECTIVE AUTHORITY REQUIRING REPORT	
		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				AR 230-1	
10. PREPARING COMPONENT (include lowest level contributing information to report) MMPD/MDBr/ANMCSec				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) None			
12. COST FACTORS							
A. MANUAL PREPARATION AND REVIEW COSTS							
GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED	=	COST PER YEAR
GS - 05 to GS - 15	\$5.00	1		\$5.00	12		\$60.00
B. COSTS OF COMPUTER PRODUCED REPORTS							
TOTAL COSTS PER YEAR							
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. Unit funds provide money for the procurement of articles or services which are not available from appropriated funds and which are for the welfare of military personnel of the unit to which the fund pertains.							
14. FUTURE GOALS							
GOAL PROPOSED BY COMPONENT FOR THIS REPORT						ESTIMATED SAVINGS	
<input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE						<input type="checkbox"/> OTHER (explain)	
						MAN-HOURS	
						DOLLARS	
16. DATE OF INVENTORY 16 Oct 70		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION SSG, Pay Pers Aff Supv				18. EXTENSION	
						<input type="checkbox"/> STAT	